

Exhibit D

Checklist for Responsiveness

<input type="checkbox"/>	Proposal was submitted on or before 4:00 p.m. on or before the due date.
<input type="checkbox"/>	Required numbers of proposal copies were submitted.
<input type="checkbox"/>	Proposal is placed in binders with tabs separating the major sections of the proposal. The four major sections shall include: <input type="checkbox"/> Financial/Contractual Proposal – Section 3.1 <input type="checkbox"/> Statewide Mental Health Housing Plan Proposal – Section 3.2
<input type="checkbox"/>	Bidder meets minimum qualifications, which are: <ul style="list-style-type: none">• The Bidder must be licensed to do business in the State of Washington or obtain a Washington State business license from the Secretary of State.• Project lead will be a psychiatrist or ARNP with a minimum of 10 years of management experience in behavioral health care.• Access to a psychiatrist with management experience in behavioral health care if the project lead is not a psychiatrist.• Documented experience in the development of criteria and provision of utilization review services for institutional and community based behavioral health care.• Documented knowledge and experience with public managed behavioral health care delivery systems including a thorough understanding of both voluntary and involuntary treatment issues.• Documented knowledge and experience with Medicaid managed behavioral health care regulations and requirements.
<input type="checkbox"/>	Proposal demonstrates that the Bidder is capable/responsible to provide the services.
<input type="checkbox"/>	Financial/Contractual Proposal is essentially responsive to core requirements of the RFQQ.
<input type="checkbox"/>	Statewide Mental Health Housing Plan Proposal is essentially responsive to core requirements of the RFQQ and does not impose conditions that would modify the RFQQ.
<input type="checkbox"/>	Letter of Submittal and Certifications and Assurances were signed by an individual authorized to bind the Bidder to a contractual relationship, e.g., the President or

	Executive Director if a corporation, the managing partner if a partnership, or the sole proprietor if a sole proprietorship.
<input type="checkbox"/>	If Minority- and Women-Owned Business participation is being claimed, a certification from OMWBE is included.
<input type="checkbox"/>	The Letter of Submittal included a statement that a Certificate of Insurance would be provided as a condition of award.
<input type="checkbox"/>	Required number of references were provided.